JULY 1, 2015 - JUNE 30, 2017 CONDOMINIUM ASSOCIATION BIENNIAL REGISTRATION APPLICATION

ALL INFORMATION PROVIDED IS PUBLIC INFORMATION

FOR OFFICE USE ONLY

CEM 01762370

3- 1/27/16

160.00 46.20 19.80

BIENNIAL REGISTRATION DEADLINE: Monday, June 1, 2015 (Bond exemption reapplication deadline: Thursday, April 30, 2015)

1.	Project registration number: 1372				
	Name of condominium project: KILEA GARDENS				
	Project street address (required):	65 KILEA PL WAHIAWA HI 96786			
	Total # units: 6	Expiration of bond on file with Commiss	sion		
	applied for a fidelity bond exemption (a	he "Expiration of bond on file with Commis all fidelity bond exemptions expire at the c n allows the AOUO to select a fidelity bon	onclusion of the biennial registration		
2.	a. List the names of the officers of the President (required): Regive Vice President (optional): Line Secretary (required): Hamiet Treasurer (required): Hame	da Ughoc H Desha	is public information).		
	b. Designated officer (from section 2) Title: VP Name: Mailing address (public): 65 F City: Wahlawa Public Email (optional): NOTE: Contact name of individual, p	Linda Ughoc Kilea Place # F State: H Zip: 96786 public phone number and public mailing a tain the documents, records, and informatical contents.	Day Phone: 808-392-5752 ddress where a unit owner and the owner's tion required to be provided to a unit owner		
3.	a. Person to receive AOUO correspond This Individual will receive notices Title: VP Name: Mailing Address: 65 Kile City: Wahiawa Public Email (optional):	Linda Ughoc a Place State: H zip: 96786 593-4160.00 906-446.20 Reg	ed): as correspondence from the Commission. Day Phone: 808-392-5752 Day Phone: \$60 \$60 \$110 \$60 \$66 \$66 \$66 \$66 \$66 \$66 \$60 \$176 \$25 \$7.593 \$50 \$176 \$226.00		

	b.	Pursuant to HRS § 514B-106.5, please identify the authorized to serve civil process, in compliance w	with Hawaii Revised	Statutes Chapter 634.			
		Name Primary: Reginald Ughoc	_ Title_ Presid	erit Telepl	none: <u>392·855</u> 0		
		Name Primary: <u>Reginald Ughoc</u> Name Alternate: <u>Linda</u> Ughoc	_ Title_VP	Telep	none: <u>392-575</u> 2		
4.	Mai	nagement status (required): (check ONE only and	d fill in corresponding	j info)			
	X	Self-managed by Association of Unit Owners (see	e Instructions)	Public Email:			
•	•	Title: VP Name: LINGA U	ghoc		(Optional)		
		Title: VP Name: Linda Walling Address: 65 Kilca Place #4	<u> </u>				
		City: Wahlawa State: H	_ zip: <u>96780</u>	Day Phone: <u>808</u>	392-5752		
		Managed by Condominium Managing Agent (see	nstructions)	Public Email:	(Ontional)		
		Management Company:			——————————————————————————————————————		
		Mailing Address:					
		City: State:	Zip:	Day Phone: _			
5.	a.	Evidence of Fidelity Bond (required) (Between se expiration date of bond on file with the Commission		HECK ONE ONLY; see Qu	uestion #1 for preprinted		
:	No evidence of fidelity bond is attached because bond on file in Question #1 expires AFTER June 30, 2015. Completed CSI form or certificate of insurance form is attached because bond on file in Question #1 expires ON OR BEFORE June 30, 2015, or evidence of current fidelity bonding is NOT on file with the Commission. b. Bond Exemption (If applying for a bond exemption, select ONE of the following exemptions. A corresponding bond exemption form on page B-2, B-3, or B-4 must be completed as part of the application process). An additional \$50 bond exemption application fee must be added to the preprinted total due on page A-1.						
W	w!	Sole Owner: Where all condominium units a sole Limited Liability Corporation ("LLC"), or 20 or Fewer Units: Where the condominium 100% Commercial Use: Where all condominium	m project contains 20 ninium units are 1009	0 or fewer units. % commercial use.			
6.		ner occupancy: Percentage of residential use units		· ·			
7.	Anr	nual operating budget: Did the AOUO board of dire	ectors adopt an annu	ual operating budget?	Yes No		
	ma	rsuant to HRS § 514B-106 (c), within 30 days after ke available a copy of the budget to all unit owners he budget and to whom that request shall be made	s and shall notify ead	posed budget for the asso ch unit owner that the own	ociation, the board shall ler may request a copy		
8.	Res	serve studies and replacement reserves: (see Instr	ructions)				
	For fun	r the current fiscal year, is the AOUO collecting a m ding one hundred percent of the estimated replace	ninimum of fifty perc ement reserves whe	ent of the estimated replan using a cash flow plan?	cement reserves OR ▼ Yes □ No		
	If y	es, what is the percent funded?:50_%					
9.	Boa of t	es your AOUO maintain and make available for ow ard of Directors Guides, Real Estate Commission b the declaration, bylaws, house rules and any amen	brochures, HRS Cha ndments? XX Yes ☐	apters 514A and 514B, HA] No	AR Chapter 107, copies		
	lf y	es, where are the materials kept?: Presiden	IT/VP Regina	uld+Linda Ug	hoc 65 KileaPl.		
10.		s the AOUO amended the declaration, bylaws, con		ther constituent document	ts to adopt the		

11.	11. Has the AOUO utilized mediation or arbitration to resolve condominium disputes within the last two years? \square Yes \nearrow No						
	If y	es, how many times? Mediation: Arbitration:					
12.	2. a. Does the AOUO have a separate email account? ☐ Yes KNo						
	What is the association's public email address? (optional)						
b. Does the AOUO maintain an internet website? ☐ Yes		Does the AOUO maintain an internet website? Yes You					
		What is the public website address? (optional)					

CERTIFICATION OF CONDOMINIUM ASSOCIATION OFFICER, DEVELOPER, 100% SOLE OWNER, OR MANAGING AGENT WITH DELEGATION OF DUTY TO REGISTER For the period July 1, 2015 – June 30, 2017

- I have read and understand the Instructions.
- I certify that this application is complete as required, and is accompanied by the required documents and fees.
- 3. I certify that I am authorized to sign this certification on behalf of this condominium association, that the information provided is true and correct, and that there are no material omissions. (It is unlawful for any AOUO, its officers, board, or agents to file with the Commission any information that is false or contains a material misstatement of fact (HRS §§ 514A-134 and 514B-99.3). Any violation is a misdemeanor.
- 4. I certify that any changes to the required information provided in questions one (1) through five (5) of the registration application information, as required by HRS § 514B-103 (a) (1), shall be reported to the Real Estate Commission, in writing, within 10 days of the date of change. I further certify that the condominium association shall continue to update all other information during the biennial registration period as required by statute and provide updated information as requested by the Real Estate Commission. Also, written notification shall be provided to the Real Estate Commission at least 30 days prior to cancellation, termination, or a material change to the information provided in the evidence of fidelity bond coverage.
- 5. I certify that this condominium association does maintain continuous fidelity bond coverage in compliance with HRS § 514B-143 (a) (3), and that evidence of fidelity bonding or bond exemption shall be filed with the Real Estate Commission throughout this entire registration period. This condominium association acknowledges that its registration shall be automatically terminated for failure to provide the Real Estate Commission with evidence of continuous fidelity bond coverage (if applicable) through June 30, 2017.
- 6. This condominium association has received sufficient notice that if it fails to submit a completed registration application and fails to maintain continuous fidelity bond coverage or an approved fidelity bond exemption, it shall not have standing to maintain any action or proceeding in the courts of this State until it properly registers (HRS § 514B-103 (b)).

Signature of Association Officer, Developer, 100% Sole Owner, or Managing Agent (Original signature or stamp preferred, however facsimile or photocopied signatures are accepted)

Print Name

OIII 2016

Print Name

OIII 2016

Date

KILEA GIARDENIS

Print Name of Condominium Association (Managing Agent include CMA Name)

CHECK ONE ONLY:[] President [Mice-President-[] Secretary [] Treasurer [] Developer or Developer's Agent registering for unorganized association [] 100% Sole Owner of Condominium Project [] Managing Agent with Delegation of Duty to Register

Mail or deliver all fees & documents to: Real Estate Branch, AOUO Registration, 335 Merchant St., Rm. 333, Honolulu, HI 96813

If you need assistance: call (808) 586-2643 to speak to a condominium registration clerk.

This material can be made available for individuals with special needs. Please call the Senior Condominium Specialist at (808) 586-2643 to submit your request.